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A DISCOURSE  
ON THE  
Epidemic Sore Throat Disease,  
SOMETIMES CALLED  
**DIPHTHERIA.**

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LADIES AND GENTLEMEN :

A disease of a good deal of severity, partaking of an epidemic character, has for some time prevailed in this country, and among us. It is of that class which is not confined to cities or villiages, but one which also extends its influence over the rural districts. It is a disease calculated to arouse and excite the maternal feelings and sympathies by its being in a measure confined to the juvenile portion of the community. The force of the disease locates upon the organs of the throat.

In endeavoring to fix on a general plan for treating a new or anomalous disease of an epidemic nature, it will be of great advantage to examine into the nature and character of violent and epidemic diseases which have prevailed at former periods, so as to compare their symptoms with those attending the present malady, and to ascertain what mode of treatment had proved most successful to control the symptoms and to cure those affections; therefore it may be of advantage to take a brief review of some of the features of those diseases and notice the results of modes of treatment so as to more correctly fix on a method of treatment which may prove most successful for the present epidemic.

All, or nearly all, of the epidemic diseases which

have prevailed in this country, according to the histories of them, have been of an inflammatory or compound inflammatory nature. An opinion is generally established that the most advisable and successful mode of treating such inflammatory and congestive diseases is, in the first stage of the cases to pretty freely use depleting refrigerant remedies.

The epidemic quincy or sore throat disease now prevailing, seems to be of a highly inflammatory character. In this affection, as it has been in other violent and epidemic diseases, those cases which are the most violent in their attacks, if left to themselves, or are aggravated by irritating or alcoholic articles, change their type sooner than mild ones, and are more likely to show symptoms of congestion or a typhoid gangrenous condition in their progress; such was often the case in the great epidemic which prevailed in 1812 and 1813, when, either by the natural run of the disease or from the exciting stimulating remedies used, the vital organs were frequently obstructed, the blood was forced into the brain or lungs, congestions of those parts took place, and in many instances a sudden and fatal termination was the result.

During the prevalence of the great epidemic from 1811 to 1815, which was generally of a pneumonic character combined with remitting billious fever, though it had many other names, and in many cases affecting the throat like quincy, an opinion extensively prevailed that the cases were at first of a typhus or gangrenous nature and this belief led to the use of mercury, cordials, spicery and alcoholic prescriptions *to ward off the typhus, and to keep the system from running down into a typhoid or gangrenous or mortified state.* Under the influence of such a course of treatment the disease proved to be

alarmingly fatal! in many places the deaths being nearly or quite one half of the whole number treated. On the other hand, notwithstanding the disease evinced a disposition to assume a typhoid condition when means were not early used to remove the congestion or inflammatory state, and particularly so when alcoholic articles were early used; it was found that by a moderate use of blood letting and an antiphlogistic sudorific course of treatment in the early stages, about nineteen out of every twenty cases were cured. About three hundred cases were treated by the author.

Authorities for these statements are contained in my history of that epidemic, as it prevailed in Dutchess County; also similar statements are made and corresponding results are given in essays on that disease by Surgeon General Mann, Hospital Surgeon Lovel, Professors Gallup, Hosack and Francis. In all of these works it is stated that by moderate bleedings and a cooling refrigerant course of treatment at first, about fifteen in sixteen were cured; and that by a free use of stimulating exciting and alcoholic articles early used, a large proportion, and in many places one fourth, one half and more of the cases were fatal!

After the inflammatory and congestive state was removed in the early stage of the case frequently a free use of supporting and stimulant treatment was indicated, and proved very beneficial.

During this epidemic Dr. Samuel Bard, who at the time of his death was president of the oldest medical college in this city, had a severe attack of it, which affected the chest; but the force of the disease siezed on the throat, like suffocating quincy, for which I bled him freely twice in twelve hours, which arrested the disease, and in four days he sat

up and soon was out. He lived in the enjoyment of good health about ten years afterward.

When the late Dr. David Hosack resided near the city of Poughkeepsie, his wife, who was subject to asthma, had a severe attack of asmatic pneumonia and quincy; the oppression and difficulty of breathing was great; Dr. H. said she would most likely die. Having been House Doctor to the N. Y. Alms House Hospital while Dr. Hosack was Visiting Physician there, and a long time under his tuition, he had a favorable opinion enough of me to call for my aid in the treatment. By his consent I took a large portion of blood which gave great relief and checked the disease—by subsequent treatment she recovered.

In 1825 a disease prevailed of an epidemic character along the Hudson River and extending into many districts of country. It was of a remittent congestive nature, inclining to or assuming a typhus character, and frequently in the beginning there were active inflammatory symptoms. In the treatment some practitioners rather freely used bleeding and refrigerant sudorific means—those cases generally got a crisis by the ninth day, and as far as was known they all recovered.

A large portion of other practitioners avoided bleeding—gave calomel, opiates, sudorifics and cordial stimulants, to which were added alcoholic articles. Many of these cases, as reported, became obstinate, protracted to three, four, five or six weeks—they passed into a typhoid or typhus state—many of them proved to be fatal.—*See Appendix.*

During the prevalence of the epidemic cholera, which was shown by post-mortem examinations and other ways to be attended with inflammation of the villous coat (inner surface) of the stomach and alimentary canal and congestion of the lungs,—Dr.

Donaldson states, "I have ascertained that in those cholera fluxes there is inflammation of the villous coat of the alimentary canal, and that by active depleting means to cure such a condition of disease they might be directly cured."

In describing simple inflammation of the villous coat of the alimentary canal without regard to an epidemic, Dr. Abercrombre gives symptoms similar to a violent case of cholera—he directs bleeding for it. Dr. Bey, Physician to the Pacha of Egypt in 1832, where the cholera prevailed with great violence, took small portions of blood and repeated the operation, gave water freely and a little opiate, but no other medicine, by which nearly all were cured—the people adopted this mode, and in numerous cases cured themselves.

British Consul General Baker to Egypt, in 1832, had the direction of a large number of cases of cholera; when the men were taken their feet were set in warm water, a vein was opened in each leg, the blood flowed into the water about fifteen minutes—he gave water freely, but no medicine, all those recovered.

Broussais and Cruvilhier of France, Bell of Philadelphia and many others, adopted this theory, and treated the disease in a similar manner with great success.

In this epidemic there was a great inclination of the people, and by a large portion of the medical faculty, to use astringents, cordials, spicery, opiates and alcoholic mixtures—under their influence it was very mortal. Reports stated that one-half and more frequently were fatal.

The plan for treating it in 1832, detailed in my history of it, was founded on the theory that there was villous inflammation of the alimentary canal and congestion of the vital organs; the result was as is

shown by a record in that work, of one hundred and twenty-five well formed cases, one hundred and nineteen of them (ninety-five per cent.) were cured; the leading remedies at first were bleeding, cold water and ice. There were here and in other instances about two cases in the premonitory state prescribed for to one of the fully formed.

For the epidemic of 1849 in New York, a similar general mode was followed; by the use of homœopathic medicines, aided in the severe cases by blood-letting—a record made at the time shows that in two hundred and sixteen cases, ninety-eight per cent. were cured.

From experience during four seasons of managing and observing this epidemic, and in witnessing it in various states and stages of about two thousand cases, some important conclusions are made:

1st.—The violent symptoms of vomiting and spasms are soon checked by blood-letting.

2nd.—There is no disease which is more readily and beneficially affected by abstraction of blood than Epidemic Cholera.

3rd.—From the burning pain of the stomach and great thirst, the patient desires a constant use of cold water or ice.

4th.—The small, flaccid and almost imperceptible pulse at first, on the abstraction of blood, becomes more full and firm and the strength of the patient increases.

The first case of epidemic cholera I ever saw was in the City of Poughkeepsie in July, 1832, it was a violent prostrated collapsed case, with rapid watery evacuations, the skin and tongue was cold, the eyes sunk in, the pulse small, tremulous and flaccid, spasms severe—by six small bleedings of three or four ounces each, with other means, in forty-eight hours he was

in a fair way of cure, and soon was well—after every abstraction of blood the pulse became fuller and firmer, and the blood increased in floridness and vitality. This was a pioneer case which lead to a decision on a plan for treating that epidemic; this case is recorded in my work mentioned at page 84.

In the fall of 1849 the Homœopathic Society of the City appointed a committee to ascertain the success of that mode of treatment; they reported that from the best information they could obtain, about ninety per cent. were cured.

About the same time the Board of Health made a report to the Common Council on the epidemic, by which it appeared, that in the Hospitals there were received about two thousand patients where they had all the conveniences for comfort, nursing and means of cure. It also appeared the remedies used were of a high stimulating nature; the number were forty-six per cent. only cured.

In an essay on the sore throat disease as it prevailed in Albany in 1859, read at a meeting of the National Homœopathic Institute by Dr. H. D. Paine, the following remarks are made:

“In severe cases there is *violent inflammation* of the glands, also of the tonsils, and uvula extending far back in the throat, accompanied by a more or less formation of a membrane of a dull white color; the attack is frequently ushered in with rigors and chills, pain in the head and limbs, with general feeling of depression; before the occurrence of the membrane there is *intense inflammation*. Deglutition is generally very painful and difficult, the fever runs high and is followed by a stage of *depression*, in general the more vigorous and healthful the subject the more decided will be the excitement.”

As the disease appeared in the city of New-York in 1859 and 1860, very similar symptoms were presented. The inflammation affected the glands, the tonsils were inflamed, swelled and ulcerated. In some cases abscesses formed in the throat, in others the lining membrane of the windpipe was inflamed producing cynanche trachealis (quinsy of the windpipe erroneously called croup), in other cases all these parts were affected at once; in some cases a thick scurf appeared on the parts. Sometimes the inflammation extended into the lungs forming pneumonia, the muscles of the neck were swelled,—gangrene or mortification did not take place in any case in my care—some cases had a thick scurf on the inflamed parts, resembling shammy leather from which symptoms it seems the disease has been called *diphtheria*. The mode of treatment pursued no doubt prevented the progress of the cases so as not to run into such a state called diphtheria.

It is an erroneous use of names to call a disease after a symptom which may or may not appear. Simple *epidemic quinsy* would do much better, it conveys a pathological idea of the nature of the disease, and would indicate a mode of treatment, In Webster's Dictionary quinsy is defined inflammation of the throat.

Dr. Willard of Albany, in describing this disease states that "there is a diffusive inflammation of the throat;"—"a high degree of inflammation of the parts and fever"—"the congestion extends to the cellular vessels"—"the tonsils were so inflamed and swelled so as touch each other."

Dr. Preston of New Brunswick states, "that at the attack there was generally a high inflammatory fever." Again, "there was inflammation and enlargement of the tonsils and glands of the neck."

Tressier of France states "that the disease is characterized by inflammation of the parts, and inflammatory fever; it is called *phlegmarsia*," (inflammatory).

In Professor Clark's Lecture on this disease, it is stated, "in diphtheria there is such forms of inflammation as terminate in a membrane in the throat,"—"the membrane is preceded by and is the result of inflammation of the throat;" "the throat is inflamed before the membrane forms;" "the disease begins with chills and fever; when it locates on the trachea there is *croup*;" "the breathing is difficult;" "the surface of the face and body frequently is purple or blue;" (showing that there is congestion and a de-oxydated state of the blood,) "there is uniformly inflammation and swelling of the glands of the neck and throat."

From such a group of symptoms at the beginning of a disease it is evident that its general character is of an inflammatory nature, and it would seem to be an advisable way to treat it as an active inflammatory disease. In such cases *all the train* of symptoms which follow depend much on the treatment in the first stage. In my Essay on the Epidemic of 1812, it is said: "The symptoms which appeared in the progress depended upon the treatment at first. When antiphlogistic means were used to check the inflammation and depression at first, the case was often mild and soon controlled; but where those agents were neglected, or such used as would aggravate it, such as mercurial, opiates, irritating and stimulating alcoholic articles, the disease often became unmanageable, typhoid, gangrenous and fatal." The same course of treatment by stimulating acrid articles with similar results often took place in epidemic cholera.

In a report made by Dr. Ramsay, from the Inspector's office in this city for February, 1861, in the mention of diphtheria, it is stated "that the term has come into use in this city wonderfully within the last year, and four hundred and twenty-two deaths are reported from it. The name of this disease (symptom) in nosology is adopted from the French in reference to the characteristic membranous exudition in the throat.

In the Report of the City Inspector for the year ending Jan. 1, 1862, there are set down from this throat disease nine hundred and twenty-six deaths.

In England, in 1858, such a disease prevailed extensively, when it was called throat disease, which in plain English is rendered quincy, as I have heretofore stated. It appears clearly that the membranous formation in the throat, erroneously called *diphtheria*, is the effect of intense inflammation which has not been checked in the early stages of the case, which probably might have been prevented by proper and active treatment.

Dr. Ramsay, also Dr. Gallup and Dr. Mann, state that when an unusual disease appears with violent symptoms there are hard or new names attached to it, such as are represented to be incurable; it relieves the prescriber from unfavorable remarks and a charge of gross error on account of the unsuccessful treatment.

During the epidemic cholera in 1832, in some instances it was stated that it could not be cured. In two villages in my vicinity, in 1832, the people were thrown into alarm and consternation by being told by medical men that it was incurable. Their declarations were confirmed by their treating six or eight patients in each place, and they all died; when the uniform success in other cases, by different treatment, proved the fallacy of their declarations.

In the prevailing throat disease it is a matter worthy of inquiry whether it might not be an improvement in the treatment in the first stage to use somewhat active means to arrest the inflammation. It is admitted, as far as I have learned, that the mucous, or matter deposited on the parts, is the effect of inflammation, and it is *not the disease*; and there may be a serious objection to call a disease after a symptom which may or may not exist. It appears that a tough exudation is deposited on some parts of the throat, resembling a piece of dressed sheep skin, or shammy leather, which is said technically to mean *diphtheria*—rather a queer, absurd name for a symptom by which to call a disease. But this is not the main objection to erroneous names, for it appears that with this term is connected the idea of gangrene, or that the case is prone to *gangrene or mortification*, or a depressed typhoid condition of the system. The unfortunate and fatal effects of treating a disease for a name instead of by the pathological condition has already been referred to in the remarks on the epidemic of 1812 and 1813 and on epidemic cholera. Under such influences of a name it may be assumed that there is a gangrenous state taking place, and remedies are apt to be used to keep off gangrene or to prevent its effects, when really there may be no such state existing. A disease attended with such symptoms as those above named would require an active depleting refrigerating course of treatment, or a mode which is found best to check and cure such an inflammatory affection.

For the severe cases as described above there is no remedy *known* which would be as useful as free depletion, which checks and controls such severe attacks more effectually than any other medical agent.

By early and prompt means to check such cases in the early stage, typhoid, gangrenous and a mortified condition is likely to be avoided; also the symptom termed diphtheria will not appear. Sir Astly Cooper says, "that by free bleeding present inflammation is relieved, and that *the malignant symptoms which would follow will be prevented.*"

By the following directions, gathered from the writings of Dr. Rush and Donaldson, patients have received great benefit. They say: "in violent diseases blood letting ought to be used early after the attack, before the blood assumes an acrid, hot, gangrenous tendency, and before congestion takes place." Without such precaution the rapid changes which the blood undergoes in such cases may and does lead to a state of typhoid, gangrene and suffocating congestion or mortification.

Patients situated as here mentioned have been treated according to this rule in hundreds of cases, and have had the disease arrested early and cut short in its progress—and in many instances by it persons have had their lives preserved.

If the statements of Astly Cooper, Rush, Donaldson, &c. are correct, that in cases of intense inflammation, if not checked in the early stages, there is danger of serious and violent symptoms taking place—such as congestion and gangrene—and if the symptom called *diphtheria* is a disposition to gangrene or something of the kind, it may be owing to a neglect of the use of efficient means in the early stages of the case.

In this exposition there is disclosed the secret of the great fatality of violent and epidemic diseases, and there is also exposed the unfortunate and fatal error of the treatment in the early stage of those diseases by the use of stimulant and alcoholic remedies.

If adults should be severely attacked with this *quinsy disease*, it would be advisable to take blood from the arm ; if the attack is not very severe, some common medicine adapted to the cure of such inflammation will answer the purpose. In childhood, if the attack is severe, they would require a similar course of treatment, but if the attack is not very severe the remedies hereafter named will be quite sufficient to cure without bleeding. Children are more prone to inflammatory diseases than adults, so they are much benefitted by having active means used to arrest such increased inflammatory action. However experience has proved that a great majority of this throat disease may be cured without bleeding.

When inflammation seizes the throat with violence, as it sometimes does, there is no time to loose by temporizing with inefficient means ; the prescriber had better at once use active remedies so as to resist the invading foe. In many cases it would be advisable to apply one or two leeches to each side of the neck over the tonsils—this would be particularly useful when blood could not be taken from the arm—in moderate cases this would answer the purpose, but in severe cases when the throat is swelling and fast closing up, it is better and safer to take blood from the arm at once. A child twelve years old and under would to advantage loose from three to eight ounces of blood, and if the violence of the case was not checked in a few hours, the operation ought to be repeated.

In the work by Broussais on Plegmasia (inflammation), it is stated that “it is inflammation which destroys the viscera essential to life, by which a majority of the human race perish—the most efficient remedy for this state is blood-letting.”

Marshall Hall states, “for inflammation, bleeding as a remedy ranks the first.”

Professor M. Paine says, "that for inflammation and congestion, blood-letting is the most efficient remedy."

Professor Morehead says, "there is no truth better ascertained than that for inflammation bleeding is the best remedy."

When describing such a kind of disease, and particularly so in pneumonia and congestion of the chest, the distinguished Dr. John Bell states, "if the patient is not relieved by a prompt loss of blood, they suffocate and die without a groan." Dr. Bard and Mrs. Hosack would have died in this way if active means had not been early used to arrest their diseases.

If there should be a doubt about taking blood in such a case on account of weakness of the patient or compressible state of the pulse, a small portion can be taken at first, as I have stated, and was often done in the epidemic of 1812 and '13, and in epidemic cholera. When the pulse will rise and become more full and firm, and the strength of the person increases, after this, if need be, the bleeding may be more full and free. It ought to be recollected that in such weakness in the first stage of disease, it is not from direct debility, but from depression, oppression, congestion, (more explanation of this hereafter).

Here are introduced some extracts from Donaldson's History of Epidemics, by which the general character of those quinsy diseases will appear.

In 1217 a violent epidemic quinsy prevailed in various places in Europe, a great many cases were fatal—"bleeding and cooling articles were the only remedies that cured it."

In 1548, there prevailed in England and other parts, an epidemic quinsy and pneumonia, attended with suffocating depression—"blood-letting and refrigerant means was the only successful mode of treatment."

In 1617, there prevailed in New England and in other parts, an epidemic quinsy (angina,) which in many instances was very fatal—"the only successful treatment was blood-letting and cooling remedies."

In 1758, there prevailed in New England and in other parts, an epidemic quinsy and pneumonia, it was attended with great oppression and prostration. It was called winter fever. In many instances it was fatal. "The mode of treatment which proved most successful, was bleeding" and refrigerating means. Many physicians opposed bleeding and their patients all died.

This was similar to the pneumonia, or winter fever, described by Sydenham, which prevailed in England about 1755, for which he recommended active bleeding and refrigerant treatment, which proved successful.

In 1798, a violent epidemic quinsy prevailed in many parts of America—"the only successful mode of treating it was by bleeding and cooling remedies."

The epidemic pneumonia and angina which appeared in this country from 1811 to 1815 was said to be very similar to the pneumonia or winter fever described by Sydenham, in about 1685, the most successful mode of treatment for it I have already pointed out. Within the last thirty years, anginas (quinsies) prevailed in our country a number of times similar in their nature to the one now prevailing, only there were not so many violent cases as now—they were all cured by the usual antiplogistic treatment.

In many violent cases of disease and particularly so in the epidemic affections, at the attack there is a small compressible pulse; a great prostration and loss of strength; a coldish doughy feeling of the skin; a

lurid face ; a weight and pressure of the chest, and pains in various parts. In such a condition of disease the people are always in favor of using cordial stimulating remedies ; also as reported a majority of medical prescribers have freely used such articles. The injurious and fatal effects of such treatment has been pointed out in the observations on the epidemic of 1812, also in the remarks on the epidemic cholera. From observations and information, it appears that such irritating and stimulating articles have been used for the epidemic throat disease under consideration.

In the published proceedings of the New York State Medical Society for 1859, there is an article on epidemic sore throat disease. In it there is recommended the use of caustics to the throat, and internally quinine, iron, cordial and stimulant articles. Under such treatment it appears that in Albany there were 188 deaths.

In Dr. Paine's essay it is stated that during that time, in Albany, almost all the cases which proved fatal were treated by a different mode than that by Dr. Paine ; and that including the stimulant articles there were over 250 deaths. The mode followed by Dr. Paine was said to be nearly successful.

During the great epidemic which prevailed in London in 1665, by the use of hot steaming cordial and stimulating treatment 70,000 people were carried off—this was at the time when Sydenham enlightened the medical world by his teachings. He raised his warning voice and moved his cogent pen against such a stimulant course of treatment.

He recommended a free use of blood letting and cooling, refrigerating remedies ; which was followed in many cases with great success.

Sydenham insisted that the disease was inherently

of a high inflammatory nature, and attended with great depression, congestion and prostration; and that the malignant symptoms of a gangrenous, mortified disposition were the effect of those violent inflammatory depressed symptoms, and a hot acrid state of the fluids.

A similar morbid condition of the system above mentioned was very common in the great epidemic of 1812 and 1813—a small compressible pulse, attended with great depression, malignancy and a disposition to mortification. Such symptoms are noticed by Surgeon General Mann, Dr. Gallup and others.

In those states of depression and congestion which sometimes take place in the first stage of violent and epidemic diseases alluded to, the blood in a measure is stagnated in the lungs, or brain, or both; in that situation it cannot receive (oxygen) vital air by breathing sufficient to support life—the blood becomes deoxydated and black; the heart seems to become paralyzed, and this was the opinion of Magendi of France. The heart is curtailed in its action, so as to be unable to propel the blood through the arterial system; hence there is a small flaccid pulse connected with prostration, and if relief is not had soon by diminishing the fluids in the vessels and the pressure upon the vital organs, life will likely be soon suspended.

In those states of depression, congestion and collapse, which were common in the epidemic of 1812 and '13, and in cholera,—and sometimes such a condition attends the incipient stage of remittent fevers, when it is likely to be called typhoid, and by some modes of treatment runs into typhus,—in such cases prescribers have frequently used permanent and diffusible stimulants. Those articles in such a state of the system strongly tend to aggravate the disease

and hasten the fatal termination of the case. From reliable information received it appears that such articles have been used for the throat disease under consideration.

It is stated that the fatal cases under their influence has been one in four; two in four; three in four, or more; and that in some instances reported whole families of children have been swept off.

In the history of the epidemic of 1793, by Dr. Rush, this kind of pulse and depression is described, and small abstractions of blood are recommended for it. By such a course of proceeding in a similar condition, many cases of the epidemic of 1812 and '13 were cured. The epidemic which he wrote about, and the statements made of the success of his treatment in 1793, show that 95 per cent. were cured.

In Dr. Rush's work it is stated, "that at a hospital fitted up for the purpose in the vicinity of Philadelphia, there were received 807 patients, and that 480 of them died. The remedies used were of a high stimulant nature—blood-letting was not among the prescriptions."

It is claimed by Dr. Rush that by the good effects of the refrigerating treatment which he introduced in the epidemic of 1793 six thousand people had their lives saved. By the side of that statement stands a dark and gloomy list of over four thousand deaths. Very few of these had the benefit of Dr. Rush's plan of treatment—they were subjected to the stimulant remedies.

Such a depressed, flaccid state of the pulse as has been mentioned, was very common in the epidemic cholera. It is an evidence in such a state of disease, of congestion, or morbid pressure of the blood upon the vital organs. It has been represented that a similar depression and compressible pulse has been observed in the prevailing epidemic quinsy.

When the throat is severely inflamed and swelled, as it is in quinsy, a mucous matter forms on the parts—the disease sometimes locates on the membrane lining, the upper part of the windpipe; then it is termed *croup*. In some cases, the passage for the air to the lungs is closed—the air to support life is cut off; this may be an immediate cause of death.

From a memorandum of an interesting case, a short extract is made. At Rhinebeck, Mr. Schell, the father of the late Collector of the Port here, had a severe attack of quinsy; the throat was intensely inflamed and swelled. After all had been done, thought advisable by three doctors, without success, the patient was given up to die, and was painfully struggling for breath, when the author of this essay was introduced, who discovered that the passage was closed up for air to the lungs; when he passed a sharp pointed instrument into the throat, and, by a quick movement, cut freely through both tonsils; the blood issued copiously, the swelling immediately subsided, the air rushed into the lungs, the breathing soon became free, the patient was calm, and in a few days he was at his business.

In some cases in the prostrated state of cholera, when there was congestion of the lungs, I have frequently seen patients struggle and labor for breath; but they were sometimes situated under care of another doctor, so that the remedy which might have relieved them could not be used, and shortly the vital principle made its exit.

It is stated by Dr. Rush, Sir Astly Cooper and Rroussais, that in those states of depression which takes place in epidemic diseases, and particularly so in epidemic, pneumonia, cholera and quinsy, that when reaction begins to take place, then it is proper to bleed. With diffidence and great respect be-

fore such authorities, I take leave to state that from my observation in cases where there is great prostration at the attack, with collapse when the blood has receded from the vessels at the skin and collected in the lungs and other vital parts, and the heart is almost suspended in its action, if the prescriber waits for reaction to take place before using means to give vent to some of the stagnated blood in the vital organs, he will probably wait until life ceases to exist. It is more likely that by a prompt abstraction of some of the blackish deoxydated fluids which will relieve the heart from the morbid pressure upon it, so that it can act more freely to propel the fluids through the arteriel system, by which the blood, in passing through the lungs, receive an increased portion of vital air, and by which reaction is aided and more likely to be brought about. Then the pulse becomes a little more and more full and firm, until fair reaction is established.

The preceding observations and facts are gathered from various authors, and my own observations and experience.

It is gratifying to be able to state that by the homœopathic method, diseases may be cured without abstracting as much blood as it has been considered advisable and necessary by the former system. But it is evident that there is great danger of running into an opposite extreme by raising unreasonable objections to its use, or by totally rejecting it, as some have done and are doing. This remedy, blood-letting, has held a prominent position in curing diseases in thousands of cases, and there are abundance of facts to show that multitudes of persons have had their lives terminated by an opposite course of treatment when it has been rejected.

It is a matter of serious consideration whether it

is advisable or justifiable to reject the use of a medical agent which for centuries has held a prominent position in curing violent and epidemic diseases. Cases do occur when an abstraction of blood, combined with homœopathic medicine, will be essential to the welfare and safety of the patient. In some such violent cases as have been referred to in the preceding observations, when the vital organs are seriously affected and changes in the qualities of the blood, which soon take place in such states of high inflammation and congestion, the rapid progress of the disease is too great to be arrested by any known medical agent, quick enough to prevent danger and great injury, which would soon ensue, short of lessening the quantity of fluids and morbid pressure upon the parts, and are acting as the exciting agents to aggravate the case.

From observations and information received, it appears that patients sometimes fail to recover by the exclusive use of homœopathic medicine, who probably might have been *cured* by a judicious use of blood-letting in the early stage of the case.

The distinguished Sir Astly Cooper says, "in those severe attacks of disease the pulse is sometimes small and flaccid; then wait awhile; often reaction begins to take place; then bleed freely, and by it the pulse raises and becomes more full and firm.

Among the cases recorded in my *Essays on Cholera* there is one of a female, in 1832, who had a violent attack of the disease with watery evacuations and great prostration; the pulse was scarcely perceptible; she was bled three times; three or four ounces were taken from the arm at a time, when reaction came out, and with such activity that she was required to be bled three times again, more freely, before the increased action was subdued. In all, she

lost over 70 ounces of blood ; she soon recovered, and enjoyed good health.

Among the people, and sometimes by the medical fraternity, there is prevailing an injurious prejudice against taking blood, urging that it produces weakness and lasting injury ; frequently obstinate objections are made to it. This opinion is very erroneous, and its influence has been a means of destroying the life of a great many people. On the attack of violent and epidemic diseases, the weakness then is from congestion or oppression, the circulation of the blood is impeded in the vital organs. In such cases, on abstraction of blood, the heart and arteries are relieved, and the inflammation is checked, the patient directly gains strength, and frequently, from being unable to raise in bed, will get up, walk the room, and help himself. For this we have the authority of Dr. Rush, in the epidemic of 1793, of Mann and Gallup, in the epidemic of 1812, and which I have frequently seen. Such occurrences frequently took place in epidemic cholera.

But when it is proposed to give the patients alcoholic preparations, it is readily assented to by the friends of the patient, and they will freely dose largely with alcoholic mixtures. From observation and information obtained, it may safely be stated that dozens of persons have had their lives terminated by the use of those stimulant alcoholic bibations, where one has been injured or died from a judicious bleeding. Statements of this kind have often been made in temperance lectures, particularly in those showing the injurious and fatal effects of alcohol in states of disease.

# MODE OF TREATMENT

## FOR THE

### EPIDEMIC THROAT DISEASE.

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'It is reasonable to infer that the doctrines, the statements, and the use of such remedies as have been successfully used in former epidemic diseases, which have been referred to in the preceding observations, will apply to the nature and treatment of the epidemic sore throat disease prevailing.

When acute inflammation locates on the brain, lungs, stomach, bowels, &c., it is well understood that active means to check it is the most advisable course to pursue—when the inflammation locates on the throat, there is an additional danger attending it that the throat may soon swell, and in a measure close up the passage of air to the lungs, and this makes it important to check the progress of inflammation as soon as possible.

This disease is said to be attended with *intense inflammation* of the throat. Then why not use such remedies for it as have been successfully used in other cases of intense inflammation? They have been fully pointed out in the preceding observations.

It is agreed by writers that there is a severe inflammation of the parts before the symptoms of gangrene or diptheria appear. Then, by the teachings of Rush, Donaldson and Sir Astly Copper, if the inflammation is thoroughly checked in the first stage of the case, there would probably be no gangrene, leather, sheep skin like formation in the throat, or diptheria to treat.

If the term *diphtheria* could be abandoned and the disease called by its more proper name, *quinsy*, a favorable move would be made toward a course of treatment. Remedies are apt to be associated with names which frequently are very erroneous and lead to unfortunate treatment. Dr. Rush says even the genius of Dr. Cullen could not make diseases march in right lines to follow names.

If it is decided that the throat disease is of an inflammatory type, then all articles of an exciting or stimulating nature ought to be avoided, and such used in the early stage as are best adapted to check and cure an inflammatory state of the system and the throat, and, if it should be present, to remove congestion.

From the preceding statements, it is presumed that a mode of treatment for the prevailing epidemic sore throat, distemper, or quinsy, will be indicated, so as to adopt a method of treatment which will prove successful.

If the nature of this disease is clearly and correctly pointed out, and the indications for cure made plain, then those who have different opinions about the medicine to be used, will not find it difficult to apply means so as to be attended with success.

In addition to what has been stated, here is given an outline of a mode of treatment; but prescribers likely will use such medicine as they may be partial to, and in accordance with a favorite system.

The mode which has mostly been followed by me, has been in accordance with the homœopathic plan; the remedies used were No. 2 of the homœopathic preparations, and sometimes of higher attenuations. They were acon., bell., ipecac, anti., bryo. In most cases these medicines, with the other means mentioned in this essay, were sufficient to effect a cure. The following mode will be the way to use them:—

**Ipecac.**—When there is nausea or vomiting, begin with this. Put 3 grains of the powder or 10 drops of the liquid dilution into a half gill of water; give the child a teaspoonful every 15, 20 or 30 minutes for a few times, when vomiting will likely be allayed or checked.

**Anti Tart** will answer the same purpose, if prepared and used in the same manner. If there is fever and swelling of the throat, without nausea, begin with

**Acon.**—Put 5 grains of the powder or 10 or 15 drops of the dilution into a half gill of cold water; give a teaspoonful every 1, 2 or 3 hours; or, if the nausea continues, this may be alternated with ipc. or anti. If the tonsils are considerably swelled and red, use

**Bell.**—To be prepared and used as is directed for acon. This is specific for some forms of quinsy; this may to advantage be alternated with acon or ipc. It is thought advisable not to continue bell over 48 or 60 hours in quinsy or scarlet fever. After the preceding course,

**Bryo** will be a very good medicine; to be prepared and given as above directed. If the inflammation and swelling is severe, apply leeches to the neck, over the tonsils or abstract blood.

**Baryta. Curbo.**—After the preceding course and the tonsils are sore and enlarged, this is a very good remedy; to be prepared and given as directed for the other medicine.

**Iodine** will be very useful for the same condition of the disease.

**Ammo. Carb.**—When there is a ropery mucus forming in the nose or throat, or has formed, as it sometimes does in quinsy and in scarlet fever, this will be a very useful medicine; to be prepared and given as directed for the other medicine.

Iodide of Merc.—In the progress when there is a tough mucus formed in the throat, and there is a swelling of the tonsils and glands of the neck, this would be a very useful and an efficient medicine.

Iodine.—When the throat is swelled, and there has formed in it and on it a tough coating of a membranous nature, this has been used with much benefit. Mode of using it:—Put 5 drops of the tincture to a half gill of water; give the child a teaspoonful every 15, 20 or 30 minutes on to an hour. By this means the membranous scurf has been detached, and came away, or may be taken away, so that the child has recovered.

Several other medicines have been recommended and used with good effect—such as bromine, rhus. T., ars., chamo., &c. The time and manner for using the medicine is more fully laid down in the “Family Physician,” and in other Repertories, under angina, croup, scarlet fever, inflammation, &c.

But there are some rules which it is advisable and important to observe, as connected with any mode of treatment. At the first stage of a case, avoid applying blisters, liniments, or any irritating or exciting article to the neck, and of giving any kind of irritating or stimulating article internally; keep the patient in a cool room and lightly covered; don't let him breath hot air nor take hot drinks. It is to be borne in mind that these articles pass directly over the affected parts, and they tend to aggravate the disease. Use no irritating articles in the throat; it seems to be an absurd and injurious practice to swab an inflamed throat with infusions of cayenne pepper and such kindred articles, which it is said is sometimes done, and it answers very little purpose to attempt to cure a violent inflammation of the system, which has located on the throat by some feeble or injurious application to the part, and equally

unadvisable to torture a child by using caustics to the throat; when there is a state of high inflammation of the parts, caustic will likely increase the disease. A substitute here is suggested for caustics: —When the throat is inflamed and very much swelled and likely to be closed up, scarify the tonsils freely, so as to have the blood flow as much as it will; then the inflammation and swelling may at once subside, and the disease be arrested; give the patient as much cold water or ice as it will take; apply a cloth wet in cold water to the neck, and change it often. The writer has not in any case used gurgles, except cold water, nor caustics to the throat, nor given emetics. When the throat and tonsils are inflamed and swelled, so as to almost close the passage, the disease cannot be vomited out; the effort to vomit is apt to close the parts, and the patient may die in the effort or soon after. I have known of some cases, and heard of others, which have been fatal in this way. Such remedies are of doubtful utility, and may do great injury. Let the patient be kept cool and calm. Should gangrene take place, it is time enough then to treat it; the remedies for it are well understood; the author has not yet had occasion to use them.

As an evidence of the correctness and utility of the theory and practice detailed in this essay, it is stated that in 1859, there were a large number of cases of sore throat disease came under the author's care. They were all cured of the disease of the throat; one had a secondary general dropsy; it lingered about two weeks and then died.

Since the first of January, 1860, a large number of cases of the throat disease, many of them very violent, have come under his care, which, added to those of the first year, would make a very large

number, some hundreds; with only two exceptions, they all recovered.

In conclusion, it is stated that by the general method of treatment which has been detailed for the epidemic quinsy, has been applied and used for the *scarlet fever*; and when it has been fairly used and properly followed, modified according to peculiar symptoms, it has invariably proved successful. For over four years there has not, under this mode of treatment, been a case fatal.

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## APPENDIX.

The remittent fevers, which prevails during the seasons of Summer and Autumn, in the first stages of the cases, are generally of an inflammatory, or a congestive, or a compound inflammatory nature. In most instances depleting or refrigerant treatment, until that state is removed, will be of great service and importance to check the disease, and will be a means of preventing a state of typhus fever taking place; and also of curing the patient, when stimulants are excluded, in a much less time than those cases are frequently cured by other means used. A great many years of observation and practice, and by treating and curing hundreds of cases, justifies these statements.

The following remarks in substance are taken from a published collection of sketches of histories of epidemic diseases, which I have collected at various times. This was read at the Annual Meeting of the Dutchess County Medical Society in October, 1825, as a valedictory offering of the retiring president. The remittent and typhus fever has prevailed

in an epidemic form in our county and along the Hudson River, during the past season, with great severity and in numerous cases. Generally it has been ushered in with acute inflammatory symptoms; but in many instances, there was a small flaccid pulse, like that which was often presented in the great epidemic of 1812 and '13. There was a dull, pressing headache—a dull appearance of the eyes—a lurid face—a tired, aching of the limbs—the tongue was contracted, pointed and red, with lively, red eyes—in some cases there was great prostration.\* When the disease was not checked early, a state of typhus was likely to set in, which might be and was, in some cases, tedious, protracted and fatal.

\* This appearance of the tongue is an evidence of an inflammatory condition of the system, and as long as it continues in a case, it is an admonition to avoid the use of stimulant alcoholic articles. This was an indication which influenced Dr. Rush to adopt a depleting course of treating the epidemic of 1793. It was a beacon guide for the use of blood-letting and refrigerating remedies in the epidemic of 1812 and 1813. During the epidemic cholera, in collapsed prostrated cases, when reaction was brought about and the case became somewhat protracted, this appearance of the tongue often was presented, which furnished an objection to the use of stimulant alcoholic articles. Let the advocates of stimulants in such states of disease, reflect with remorse and shame, how many patients they have sent over to the undertaker, while practising against depletion on one side and pouring stimulant alcoholic mixtures down the throat on the other.

The treatment which proved most successful was, in the early stage, to use active means to remove the congestion and inflammatory state; for this purpose blood-letting was the most useful remedy. The succeeding symptoms were shaped by the use or omission of this remedy. In those cases where there was great depression or congestion, and the pulse was flaccid, as it generally is in such states of disease, the portion of blood taken at first was small, and

sometimes the operation was repeated, as was practised in the epidemic of 1812, and in that of 1793, as was recommended and used by Dr. Rush, in such a condition the pulse on bleeding became more full and firm; the medicine used was of a refrigerating, sudorific nature; the fever run out and a crisis formed by the ninth day; there was no stimulants given till after the crisis, and very little then; nourishment was mostly relied upon to restore the strength. Some of the cases passed into a typhoid state; but on account of the early management, it was soon controlled by this treatment. There was not one case fatal. In many instances and in various places, from reports made and information received, attempts were made to cure this disease by the use of alexipharmic remedies, such as mercury, opiates, sudorifics, cordials and alcoholic mixtures, and those were given in free large doses. Generally a long, tedious sickness ensued—the case run along for 3, 4, 5 or 6 weeks—the patient got a black scurf on the tongue and teeth—then came on stupor, delerium, nervous irritation, spasms, and a train of those symptoms called typhus. A large portion of such cases terminated in death!!

There is an account given by Dr. Donaldson of a remittent bilious fever which prevailed in the City of New York in 1822. It was of an epidemic character, and disposed to be very malignant. He states that it had severe inflammatory or compound inflammatory symptoms—that he treated a large number of cases by free blood-letting and refrigerating remedies, and that 19 in 20 cases were cured. It is added—“A large number of my neighbor practitioners objected to bleeding; they gave calomel and exciting anodyne sudorific medicine and alcoholic articles. Those treated in this manner half died.”

About 1830, an address on remittent and typhus

fever was read by Dr. Maygel, in Albany, to the New York State Medical Society, in which it was argued that in this country those fevers in the first stage of the cases, were of an inflammatory or compound inflammatory nature—that unless this condition of disease was relieved or checked in the early stage of the case by antiphlogistic remedies, a typhoid, protracted state was likely to ensue. This is similar to opinions contained in Armstrong's "Treatise on Congestive and Typhus Diseases," and the antiphlogistic practise in the first stage is recommended by him.

In 1856 there was a severe epidemic remittent fever prevailed at the Quarentine on Staten Island and in the vicinity. From a description of it, there appeared to be attending in it inflammatory congestive symptoms. It was understood that there was very little or no depleting remedies used for it, but those of a stimulant nature. In a report on it, made by the Quarentine Doctor to the Legislature, in January, 1857, it was stated that there were "reported 538 cases, and that more than one-third of them died."

Cases of remittent fever, sometimes becoming typhoid similar to those detailed, have taken place at various periods, and a number of such have occurred lately, which have terminated very differently under different modes of treatment. Some of them were of importance enough to accupy a place here. From a number, all treated alike and all cured, one is selected:—

1861, December 20th, R. I. took cold; the effects increased, so on the 20th he was confined to bed with fever. 1862, January 1st, I first saw him, when he was prostrated—dull pressing headache—tired, aching pain of the limbs—pressure of the chest—tongue pointed and red edges—pulse flaccid—

mind impaired—general symptoms of congestion. From the arm sixteen ounces of blood was taken, after which the pulse was more firm and regular. He was given cold water freely; homœopathic medicine only was given. From this time the symptoms abated; the mind was more correct; the medicine was changed to the prominent symptoms; he was confined to the use of cold water and gruel, all irritating and stimulating articles were excluded; the fever and disease abated. On the 10th of January the fever subsided, and a crisis formed; on the 12th he sat up; from that he daily walked the room; there was no stimulants given; used merely nourishment; on the 20th he went out of his room fully cured.

Within my knowledge, about the time of the preceding case, a number of others of a similar character took place, which were reported by those who attended, so that a very correct account was obtained. It appears that they were treated pretty freely by stimulant articles and without depletion. One as a sample is selected from a number:—

Mr. ——— was attacked with a cold, and in ten days he took to bed, with symptoms similar to those of R. I. In four days he was prostrated and very much distressed—fever high, tongue red and pointed. It was now stated that he had typhoid fever. There was given beef tea, and soon after a free use of wine. The patient became indifferent—inclined to stupor—was very uneasy—a black scurf formed on the teeth and tongue, the edges of the tongue retaining a florid red—he was prostrated—to keep him from sinking and running down, the wine was increased and brandy was added in free portions—he became very uneasy—the mind was impaired and deranged—nervous irritation came on. In this manner, he struggled along five weeks, then died!